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PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 8734.214.00-US	
In re Application of YUN, Hae Jin			
Application Number 10/606,808		Filed June 27, 2003	
For: LIQUID CRYSTAL DISPLAY DEVICE AND METHOD FOR MANUFACTURING THE SAME			
Art Unit 2871		Examiner George Y. Wang	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- One month (37 CFR 1.17(a)(1)) \$ 120.00
 - Two months (37 CFR 1.17(a)(2)) \$ _____
 - Three months (37 CFR 1.17(a)(3)) \$ _____
 - Four months (37 CFR 1.17(a)(4)) \$ _____
 - Five months (37 CFR 1.17(a)(5)) \$ _____
- Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0911.

I have enclosed a duplicate copy of this sheet.

- I am the
- applicant/inventor.
 - assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 - attorney or agent of record. Registration Number _____
 - attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 53,005

September 15, 2005
Date

Valerie P. Hayes
Signature

(202) 496-7500
Telephone Number

Valerie P. Hayes
Typed or printed name

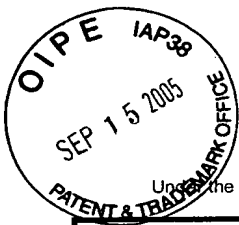
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

Total of _____ forms are submitted.

09/16/2005 JADD01 00000013 10606808

01 FC:1251

120.00 OP



Effective on 12/08/2004 Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="text-align: center;">FEE TRANSMITTAL FOR FY 2005</h2>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/606,808
TOTAL AMOUNT OF PAYMENT (\$)120.00		Filing Date	June 27, 2003
		First Named Inventor	Hae Jin YUN
		Examiner Name	George Y. Wang
		Art Unit	2871
		Attorney Docket No.	8734.214.00

METHOD OF PAYMENT (check all that apply)

Check
 Credit Card
 Money Order
 None
 Other (please identify): _____
 Deposit Account
 Deposit Account Number 50-0911
 Deposit Account Name: _____
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
 Charge fee(s) indicated below
 Charge fee(s) indicated below, **except for the filing fee**
 Charge any additional fee(s) or underpayments of fee(s)
 Credit any overpayments
 under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**
 _____ - 20 or HP = _____ x _____ = _____ **Fee (\$)** **Fee Paid (\$)**
 HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**
 _____ - 3 or HP = _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee(\$)	Fee Paid (\$)
_____	_____	_____	_____	_____

_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Other:	Fee Paid (\$)
Petition for One-Month Extension-of-Time	120.00

SUBMITTED BY

Signature	<i>Valerie P. Hayes</i>	Registration No. (Attorney/Agent)	Telephone (202) 496-7500
Name (Print/Type)	Valerie P. Hayes	53,005	Date September 15, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**
 If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.